RECEIVED FEC MAIL CENTER

-2010 JAH 19 AM 10: 25 ___

FEC FORM 1

STATEMENT OF **ORGANIZATION**

				Office Use Only
	NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
	GUGLIOTTI FOR GONGress			
	ADDRESS (number and street)) [1,21,1] MWY 7,8,5,0,4,TH		
	(Check if address is changed)			
		MIXITIE		[T_X] [7_5]0,9,8]-
		1	CITY	STATE ZIP CODE
	COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)			
Z T	Lowel Lighorors Routes.			(0 m- , , , , , , , , , , , , , , ,)
(3)	(Check if address is changed)	<u> </u>	N. S. P. OI. T. S. F. V.	
22				
M O	COMMITTEE'S WEB PAGE ADDRESS (URL)			
00	1-7 Charle Maddens	WWW9 404	G16410TtiF1	or Congression Com
rmj	(Check if address is changed)	1		
			<u> </u>	٠/١٠
	The ATTLE STATE	CART A DESCRIPTION OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF	_	
	2. DATE 0, 1 (5) (30.00)			
	3. FEC IDENTIFICATION NUMBER			?
	4. IS THIS STATEMENT NEW (N) OR AMENDED (A)			
	4. IS THIS STATEMENT N	NEW (N) OR	AMENDED (A)	·
	I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.			
	Type or Print Name of Treasurer Karen GIGLLOff			
	Mountain A Ha			
	Signature of Treasurer	10101119 LO		Date 0 (1.5 J.0) 0
	U V			
	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.			
Office M 35				
	Use Only 120		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	